24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
THE CONSERVATIVE STRIKEFORCE	
	C C00457291
Check if 24-hour report 48-hour report New report Amends report filed on	06 18 2014
Full Name of Payee ACTIVE ENGAGEMENT LLC	e of Public Distribution/Dissemination
Mailing Address 44084 RIVERSIDE PKWY	06 18 2014
SUITE 350	ount
City State Zip Code	1000.00
LANSDOWNE VA 20176 Tran	nsaction ID : SE.82007 e of Disbursement or Obligation
Purpose of Expenditure VOTER CONTACT eMAILS Category/ Type 004	M 06 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office Soug	ght: House District: 00
CHRISTOPHER BRIAN MCDANIEL Oppose President	
Calendar Year-To-Date Per Election for Office Sought Disburseme 2200.00 2014	ent For:
Full Name of Payee Date	e of Public Distribution/Dissemination
Mailing Address Amo	ount
City State Zip Code	
Date	e of Disbursement or Obligation
Purpose of Expenditure Category/ Type	M M / D D / Y Y Y Y Y
Name of Federal Candidate Support Office Sough	ght: House District:
Oppose Presi	ident Senate State:
Calendar Year-To-Date Per Election for Office Sought Disburseme	ent For: Primary General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	1000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	1000.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
SCOTT B MACKENZIE [Electronically Filed] Date 09	/ 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	